

Youth for Innocence Chapter Application Form

Thank you for your interest in establishing a Youth for Innocence chapter! Please complete the following application form and email a scanned copy to info@youthforinnocence.org once it is completed. Please note that **all members** of your chapter must complete the online training course available on the Youth for Innocence website. Your chapter will not be approved until **at least 5 members** have successfully completed this training.

Requirements:

1. Your chapter must have **at least 5 volunteers** (including the Chapter Leader).
2. Your chapter must **collectively** commit to a minimum of **20 hours per week** toward casework and other activities.
3. Your chapter must have an **in-person meeting space**. Whether it be at a member's house, a school building, or somewhere else, Youth for Innocence's chapter program aims to foster in-person collaboration.

Once the form is submitted and the requirements have been met, you will receive a copy of the completed application form. Chapters may request funding for projects. Youth for Innocence encourages chapters to propose budgets for community initiatives.

1. Proposed Chapter Name:

(See website for examples)

2. Proposed Chapter Leader:

3. Are you a part of a school or a region?

(Check one)

School

Region

3a. Name of school or region:

4. How many members are part of your chapter?

5. Is this chapter an official school club?

(Check one)

Yes

No

5a. If yes, is there a faculty advisor?

Advisor Name:

Advisor Email:

8. Where is your meeting space?

(Select all that apply)

School building

Member's house

Public space

Other: _____

7. When are the chapter's set meeting times? If there are no meeting times, why?

8. Is anyone on your team willing to store a case file in a secure location (i.e., at their house/dorm)?

(Check one)

Yes

No

9. Does anyone on your team have a feeder scanner? Are they willing to use it to scan a case file if needed?

(Check one)

Yes

No

10. Youth for Innocence tries to give chapters local wrongful conviction cases which align with their interests to increase motivation and expedite casework. Please specify what type of cases you wish to receive:

11. Are there any special requests for your chapter, or extenuating circumstances of which Youth for Innocence should be made aware?

Chapter Leader Agreement

By signing below, I, the Chapter Leader, commit to leading by example. I will take on the largest and most menial assignments when necessary and ensure cases continue to progress. If my team is stuck, or if I simply want some feedback on an idea, I will reach out to Helena Palladino (Director of Post-Conviction Work), Bijan Taheri (President), or other experienced team members for guidance. We must work together to achieve our goal of exonerating the innocent.

I have filled out this form to the best of my ability. I understand that I am responsible for the actions of the chapter. If I fall below 5 volunteers, for whatever reason, I will let Youth for Innocence know immediately so the organization can continue to ensure progress on cases.

Chapter Leader Name: _____

Chapter Leader Signature: _____

Date: _____

Administrative Approval

For Youth for Innocence Director Use Only

- Approved
- Sent Back for Revision
- Denied

If not approved, please provide reason:

Signature of Director of Post-Conviction Work:

Date:

Signature of President:

Date:
